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Annual Report

OF THE

Medical Officer of Health

FOR THE

Arnold Urban District,

FOR THE YEAR 1913,

TOGETHER WITH THE

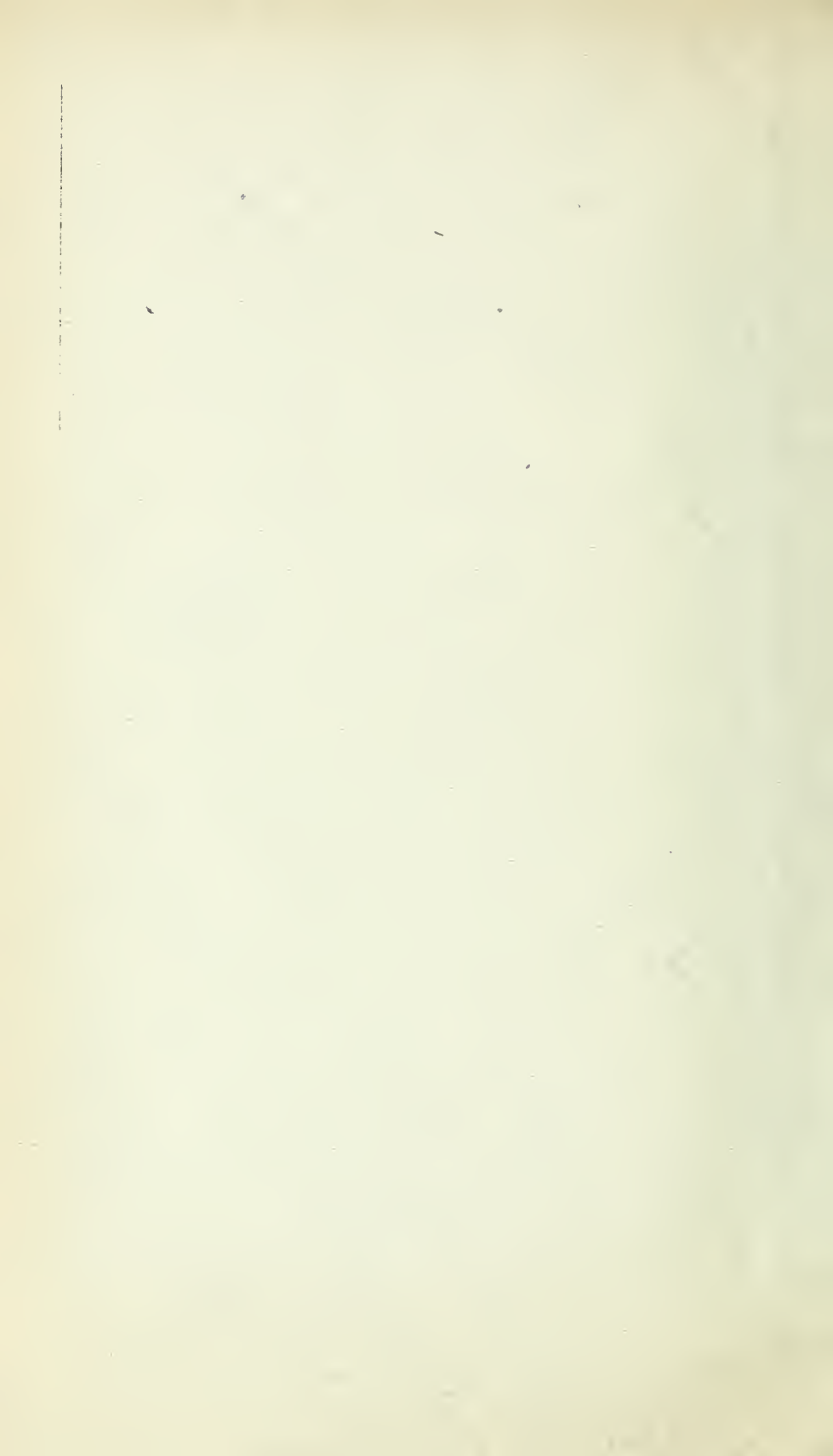
REPORT

OF THE

INSPECTOR OF NUISANCES.

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1914.



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Rate Collector : MR. T. GRETTON.

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ANNUAL REPORT
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Medical Officer of Health
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Report of the Inspector of Nuisances.

ARNOLD, MARCH 16TH, 1914.

TO THE ARNOLD URBAN DISTRICT COUNCIL.

GENTLEMEN,

I beg to present my Seventeenth Annual Report.

It deals, as usual, with the vital statistics and the sanitary condition generally of the district. These Annual Reports vary only in detail, they are really the resumé of the reports sent to you month by month, and it is difficult in a small district like this to find much information which is not already known to the Members of your Council. These reports, besides being distributed to the Members of the Council, are sent to all those who appear to take an interest in the well-being of the district, and by the order of the Local Government Board three copies are sent to them, one to the Home Office and one to the County Council. Copies are also sent to the Medical Officers of Health of the various Urban and Rural

Districts in the County, in this way Health Officers are brought in touch with each other and they can see what others are doing, which is both instructive and interesting.

VITAL STATISTICS.

I.—*Population*.—At the end of June I estimated it at 11,839, which is an increase of 193 on the previous year. The natural increase by excess of births over deaths was 124, there having been 278 births and 154 deaths registered, leaving 69 to be accounted for by immigration into the district; this is comparatively a small increase and suggests, so far as this place is concerned, that trade and work have been about the same as in the previous year.

This estimated population was arrived at by ascertaining the number of occupied houses on the rate book, kindly supplied to me by Mr. Askew, and by taking the number of persons per house found at the last census. The total number of occupied houses at the end of June was 2631, and the number of persons per house 4·5.

The estimation of the population is important, for most of the vital statistics are calculated on it. This method of ascertaining the population might at first sight seem to be infallible, but it is often erroneous, as the inhabitants of a house constantly vary, especially in a working class district; in times of good trade they usually increase, and in bad times and when rapid building has been going on they usually decrease; however, the census has been taken so recently that for the next year or two at any rate the figures will be approximately correct.

II.—*Deaths*.—There were 139 deaths registered in the district during the year—64 males and 75 females—resulting in a death rate of 11·75 per 1000. This is the gross rate, and the transferable deaths have to be taken into consideration. Transferable deaths are the deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they usually lived. The nett deaths are obtained by subtracting the number of deaths of persons dying in the district, but who usually lived outside, and by adding the number of deaths of residents who have died elsewhere. The first of these classes is obtained by the Medical Officer of Health from the returns made to him by the local Registrar, the second through the County Medical Officer, who has

quarterly returns sent to him by the Registrar General, and he in turn distributes them to the different districts.

I have received particulars of 15 deaths—13 males and 2 females—from the County Medical Officer, which have to be added to those registered in the district, and there are none to deduct, so the nett deaths are 154—77 males and 77 females—and the nett death rate is 13.

These transferable deaths occurred as follows:—

8	in the Basford Workhouse.
2	„ General Hospital.
2	„ Notts. County Asylum.
1	„ Basford Sanatorium.
1	„ Children's Hospital.
1	at Shirebrook.

It may be interesting to quote the death rates for the months:—

January	... 16.74	July ...	... 8.93
February	... 13.39	August	... 18.97
March	... 11.60	September	... 10.70
April ...	... 6.69	October	... 11.16
May ...	... 10.0	November	... 7.68
June ...	... 9.81	December	... 16.68

The following is the table of deaths and death rates for the previous ten years.:—

		DEATHS.		DEATH RATE.
1912	...	132	...	11.33
1911	...	131	...	11.68
1910	...	134	...	12.23
1909	...	169	...	15.71
1908	...	173	...	16.28
1907	...	132	...	12.67
1906	...	140	...	13.68
1905	...	162	...	15.38
1904	...	143	...	14.40
1903	...	133	...	14.85

This table represents an average of 144 deaths and a death rate of 13.82.

The Registrar-General's return for 1913 is:—

				CRUDE.	STANDARDIZED.
England and Wales ... ..	...	...	...	13·7	13·4
96 great towns ... ..	...	...	...	14·3	14·7
145 smaller towns ... ..	...	...	...	12·8	13·0
England and Wales less the 241 towns				13·1	12·1
London... ..	...	...	...	14·2	14·2

Of the 154 deaths:—

31	were under 1 year of age.
5	were between 1—2 years of age.
6	„ 2—5 „
12	„ 5—15 „
7	„ 15—25 „
15	„ 25—45 „
27	„ 45—65 „
51	were over 65 „

The diseases causing the chief mortality were:—

Premature Birth, etc.	16
Heart Disease	16
Diphtheria	11
Bronchitis	10
Cancer	9
Pulmonary Tuberculosis	8
Diarrhœa	8

Two inquests were held.

Age Mortality.

Table III shows the ages at which the deaths occurred, and also the causes of death classified and arranged. The following is the percentage of deaths at different ages:—

Under 1 year ...	31 deaths	...	20·13 per cent.
Between 1—5 years	11 „	...	7·14 „
„ 5—15 „	12 „	...	7·79 „
„ 15—45 „	22 „	...	14·28 „
„ 45—65 „	27 „	...	17·53 „
Over 65 „	51 „	...	33·11 „

Seasonal Mortality.

41 deaths occurred in the 1st quarter, or 26·62 per cent.

33	„	„	2nd	„	21·42	„
43	„	„	3rd	„	27·92	„
37	„	„	4th	„	24·02	„

Infant Mortality.

There were 31 deaths of Infants under 12 months of age, which means a death rate of 111 per 1,000 nett births.

The causes of these deaths were :—

Premature Birth	...	...	...	9
Marasmus	...	...	...	6
Diarrhœa	...	...	...	5
Enteritis	...	...	...	3
Pneumonia	...	...	...	2
Diphtheria	...	...	...	1
Abdominal Tuberculosis	...	...	...	1
Bronchitis	...	...	...	1
Congenital Malformation	...	...	...	1
Unclassified	...	...	...	2

The following, from the County Medical Officer's Report for 1912, is an interesting table of the infantile death rates of surrounding districts for that year :—

Eastwood	...	...	...	137
Sutton-in-Ashfield	...	...	...	131
Mansfield Woodhouse	...	...	...	123
Kirkby-in-Ashfield	...	...	...	123
Huthwaite	...	...	...	106
Hucknall Torkard	...	...	...	96
Arnold	...	...	...	89
Mansfield	...	...	...	89
Worksop	...	...	...	84
Warsop	...	...	...	77
Carlton	...	...	...	64
West Bridgford	...	...	...	60
Beeston	...	...	...	60

Average of Urban Districts, 95.

The Registrar-General's Return for 1918 is:—

England and Wales	...	...	109
96 great towns	...	...	116
145 smaller towns	...	...	112
England and Wales, less the 241 towns			96
London	...	...	104

The infant mortality rate is the lowest except one ever recorded in this district, the lowest being 89 in 1912, and the highest 254 in 1897. The dry summer, though not excessively hot, was conducive to infantile intestinal diseases, and the death rate compares favourably with that of the year 1911, which was also dry, the death rate then being 138. There is little doubt that the spread of the more serious infantile diseases prevalent in warm weather is largely aided by carelessness in keeping milk in poor homes, so that however pure the supply may be the mortality will still remain high unless parents are warned and instructed on this point. Particularly is it important that vessels containing milk should be protected by suitable covers from the attention of flies, whose sticky feet transfer many microbes to whatever food they touch.

No doubt boiling the milk is good as a preventive measure, but Health Visitors should bear in mind that parents often fail to grasp the fact that they must not rely entirely on this prevention to protect their children. One of the chief things that has to be carried out now in this connection is the thorough instruction of the mothers as to the necessity for the greatest care in keeping free from dust, or other contamination, every article of food intended for their children, from the moment it comes into the house until it is actually consumed.

In a report of the Registrar-General I noticed the following facts, which are, I think, very interesting:—

Occupation of Parents.	Infant Mortality Rate.
Miners	160
Unskilled Labourers	152
Artisans	113
Agricultural Labourers	97
Army Officers	44
Naval Officers and Solicitors	41
Medical Practitioners	39

These are significant figures and show that the present infant mortality is not unpreventible, but that a great deal depends on the environment of the child.

The Health Visitor has again done excellent work during the year, she has worked hard and been most painstaking. Her duties are chiefly:—

(1) To advise expectant mothers on the management of their health, and as to the influence of ante-natal conditions on their infants.

(2) To follow up the Notification of Births, and to visit the homes constantly during the first few months of the child's life.

(3) To note conditions of ignorant feeding, or of non-supply of sufficient nourishing food, and to take judicious steps to correct these evils.

(4) To give advice on the proper feeding of infants, to warn mothers against premature weaning, and to advise generally on domestic hygiene.

I have noticed the results of Miss Edgeller's teaching in many homes, not only as regards the infants, but also in respect to the general sanitation of the house, ventilation, cleanliness, etc.

The following is an epitome of her report for the year:—

Number of visits:—

First visits on notification	...	266
Re-visits during 1st year of life		2672

The method of feeding adopted:—

Wholly breast fed	...	...	236
Artificially fed	...	...	16
Partly breast, partly artificial	...		14

The average weight at birth was 8·5 pounds, which is very much above the usual average.

Average weekly attendance on Thursday afternoons—18. 190 mothers have availed themselves of the opportunity of getting their children weighed, etc. Miss Edgeller thinks that much good has

resulted from these informal talks on Thursday afternoons, mothers can ask advice on their own particular needs, and probably they receive more help than they would from a set lecture.

These meetings are now registered under the Infant Welfare Association.

III.—*Births*.—278 were registered during the year—135 males and 143 females; there were no transferable births, the nett Birth Rate is therefore 23·48 per 1000 of estimated population.

The following is the Registrar-General's return for 1913 :—

England and Wales	...	...	...	23·9
96 great towns	...	...	...	25·1
145 smaller towns	...	...	...	23·9
England and Wales less the 241 towns				22·2
London	...	...	...	24·8

Our birth rate is the lowest recorded in the reports in my possession, and which date from 1886.

A declining birth rate is practically universal throughout Europe and our Colonies, and various explanations have been suggested as to the cause.

The marriage rate does not vary to any appreciable extent, though it is true that marriages later in life are more frequent than formerly.

The chief suggested explanations are :—

(1) A general decline in fertility amongst western civilized nations.

(2) The high standard of living, and greater love of pleasure, and the consequent shirking of parental responsibility.

(3) The wilful limitation to the number of children born.

It has been urged by some that it is a good thing that fewer children are born to occupy vacant places, so that each has more elbow-room, and that the quality of human life has improved simultaneously with the decline in quantity; however, whatever excuses are put forward, the fact remains that for more than a quarter of a century the birth rate has been declining throughout our Empire. A strong and representative commission has been appointed to investigate the causes and effects of these changes in

the birth rate, and to consider the economic and national aspects of the decline.

Under the Notification of Births Act 269 births have been notified to me; there is a difference of 9 between the births actually registered and those notified under the Act; but as notification is within 36 hours of birth, and registration within 6 weeks, it will never be possible for them to exactly correspond, as a large number of the December births will be registered in January, and consequently appear in the registrar's return for that year, whereas under the Act they would appear in the previous year.

The Health Visitor has occasionally reported to me a birth which has not been officially notified, but on the whole the regulations have been well complied with by the medical men and midwives in the district.

There were 9 illegitimate births, or a proportion of 32·3 per 1000 births. There were 4 deaths, which means a mortality amongst the illegitimate children of 444 per 1000 births compared with 100 for the legitimate. I have several times in previous reports remarked on this startling difference, and have nothing more to add, excepting that this difference continues year after year, and is surely due to more than coincidence.

IV.—*Infectious Diseases*.—There were 148 cases notified during the year. The numbers for the previous five years were 73, 71, 51, 31, 25. The attack rate per 1,000 of the population is 12·5.

The following were the diseases:—

Scarlet Fever	...	...	...	90
Diphtheria	...	...	...	47
Pulmonary Tuberculosis	...			5
Other forms of	„	...	...	4
Erysipelas	...	...	...	1
Enteric Fever	...	...	...	1

The monthly distribution was as follows:—

January	...	3 Cases	July	...	4 Cases
February	...	7 „	August	...	13 „
March	...	7 „	September	...	20 „
April	...	13 „	October	...	25 „
May	...	10 „	November	...	16 „
June	...	7 „	December	...	23 „

Table II shows the ages at which they occurred.

There were 26 deaths, viz.:—

Diphtheria	...	...	...	11
Scarlet Fever	...	...	...	6
Erysipelas	...	...	...	1
Diarrhœa ...	...	...	...	8

This represents a death rate of 2·19 per 1,000 of the population, which is considerably higher than the average.

Notifiable Infectious Diseases.

I.—*Enteric or Typhoid Fever*.—One case was notified during the year. I enquired carefully into the history of the patient, but it was quite impossible to trace the source of his infection. He was a police constable, and had been residing here for some time, and had not slept out of the place for months, though he had occasionally to get a meal elsewhere; his house was free from any sanitary defect. It is often very difficult to trace a cause in an isolated case like this; when the disease appears in epidemic form the origin is usually from infected milk or water; there had not been a case in Arnold for over twelve months. This patient was sent to the Basford Sanatorium, as he could not be properly nursed at home, he had a very severe attack, but eventually recovered.

II.—*Diphtheria*.—47 cases were notified, as compared with 24 in the previous year. For the second year in succession I have to report that the disease was present in the district for practically the whole of the year, July being the only month in which a case was not notified.

As I said in my last Report, Diphtheria appears to have been on the increase during the last few years, but this may be partly due to the fact that bacteriological examinations are now easily obtained, and a good many cases are recognised as Diphtheria which would previously have escaped notice.

There were 11 deaths, resulting in a fatality of 23·4 per cent.; the attack rate per 1,000 of the population was 3·96.

The following table gives the number of cases and deaths during the last few years:—

	Cases.	Deaths.	Fatality per cent.
1904 ...	23	8	34·7
1905 ...	1	1	100·
1906 ...	8	2	25·
1907 ...	12	1	8·3
1908 ...	12	5	41·7
1909 ...	3	0	0·
1910 ...	13	0	0·
1911 ...	32	4	12·5
1912 ...	24	3	12·5
1913 ...	47	11	23·4

Two cases were sent to the Basford Sanatorium.

The disease varied greatly in severity, whereas some of the cases were of the mildest description, there were others in which it was of the most virulent type. At no time was it confined to any particular locality, but cases kept cropping up in different parts of the District, and apparently having no connection with each other.

The death-rate from this cause is exceedingly high, and approaches very nearly to the period when Antitoxin was unknown, but the chances of a patient depend to a great extent on *early* treatment, and unfortunately, in a good many cases, the disease has made considerable headway before a doctor is called in, and then recovery is a matter of doubt, but even in these cases the marvellous results of Antitoxin are often seen.

In May I examined the children in a class of the British School, as there were some away on account of Diphtheria, and others with a "sore throat," but there was no trace of the disease in any of them; as, however, the disease appeared afterwards to be attacking the children of this school particularly, I advised you to close it for a fortnight.

Up to the date of this Report there have only been 5 cases notified since the beginning of the year, so I trust this epidemic is practically at an end.

III.—*Scarlet Fever*.—No less than 90 cases of this disease were notified during the year; this is the largest number that I ever have had to report, although in 1903 there were 89. The disease was spread throughout the District, no locality or school being particularly effected, though I inspected all the children of the Church Drive

School, as at one time several children were away, as well as two of the teachers, and I thought that there might possibly be a child attending in an infectious state, however I found none. The first case was notified on March 10th, and though there were only one reported during April the disease has been epidemic in the District ever since.

The type of the disease generally was mild, although there were two cases of malignant Scarlet Fever, which of course were fatal. In my experience Scarlet Fever has of late years changed its character, it is now usually of a mild description, but occurring often, whereas formerly epidemics appeared at longer intervals, but the disease was more severe. Six of the cases were removed to the Sanatorium on account of insufficient accommodation at home. A good many of the cases were complicated by Diphtheria, which, of course, added much to the danger of the patient. Scarlet Fever and Diphtheria are distinct diseases, though it is a very usual occurrence to have them existing in the same patient at the same time, and an epidemic of one is often followed by an outbreak of the other.

The attack rate per 1,000 of the population is 7·6, which is exceptionally high, as is also 6·6 the mortality per cent. It is interesting to note the exact causes of death in the six patients who died :—

Two were certified as dying from malignant Scarlet Fever, two from Scarlet Fever and Diphtheria, one from Scarlet Fever and Hematemesis, and one simply Scarlet Fever.

The average fatality per cent. is about 2.

IV.—*Erysipelas*.—One case was notified, which ended fatally. Erysipelas is not an infectious disease in the popular meaning of the word, the infection takes place only through an abrasion of the skin, and it is chiefly of importance in connection with surgical operations.

V.—*Puerperal Fever*.—No cases of this disease have been notified in this District since 1908. No doubt this gratifying occurrence is in part due to the action of the Midwives Act, of 1902, by which no woman can practise as a midwife unless she be certified, and moreover there are very strict rules as to when she shall send for medical help.

In the last official list there were the names of six midwives living in the district, five of whom had notified their intention to

practise; one of the latter, who did very little work, has since died, two of the others attend very few cases indeed, whilst the remaining two are rather inundated with work. There appears to be a scarcity of midwives generally. There is a marked improvement in general knowledge and cleanliness amongst the midwives and monthly nurses in Arnold, and they are regularly inspected by a lady appointed by the County Council.

VI.—*Small Pox*.—There were no cases during the year. Vaccination is, I believe, still on the decrease, and I fear that sooner or later there will be a heavy penalty to pay for the neglect of this simple and harmless preventative.

I would again urge that any suggestion for utilizing the Rushcliffe Hospital for other infectious diseases will not be entertained by the Council, it is of the utmost importance that we should have a place for the *immediate* isolation of the *first* case of Small Pox.

VII.—*Pulmonary Tuberculosis*.—There were 8 deaths from this cause, giving a death rate of $\cdot 67$ per 1,000 of the population.

The following table gives the death rates for the preceding 10 years, showing an average of $\cdot 88$:—

1903	...	...	1.11
1904	...	...	$\cdot 90$
1905	...	...	1.23
1906	...	...	$\cdot 68$
1907	...	...	1.15
1908	...	...	1.31
1909	...	...	$\cdot 92$
1910	...	...	$\cdot 91$
1911	...	...	$\cdot 35$
1912	...	...	$\cdot 25$

The death rate from other Tuberculous Diseases is $\cdot 33$ per 1,000, and from *all* Tuberculous Diseases 1.01. Since February 1st, by an order of the Local Government Board, all cases of Tuberculous Disease of whatever organ of the body have become compulsorily notifiable to the Medical Officer of Health, and he has to keep a complete record of the particulars of such cases; there is thus now a register of *all* cases whether occurring in Hospitals, Poor Law Institutions, Sanatoria or private practice.

The cases notified to me were :—

5 by private practitioners.

4 by the Hospital Staff.

Tuberculosis of the lungs is now recognised as an infectious disease, and its death rate is far higher than that resulting from any other infectious disease.

The following figures show the death rate per 1,000 :—

From Tuberculosis of the lungs	...	1.06
From all forms of Tuberculosis	...	1.46
From Measles	... ..	.36
From Diphtheria	... ..	.13
From Typhoid Fever	... ..	.06
From Scarlet Fever	... ..	.05

Unlike other infectious diseases consumption is a chronic disease. In the case of other infectious diseases the sufferer can be isolated until the complaint has run its course, but this is not possible in the case of Tuberculosis. Another point of difference is that the communication of infection can be prevented by the patient himself if he has learnt some simple precautions.

The Local Government Board for some time has been waging a vigorous campaign against this disease, both from a preventative and curative point of view. The Housing, Town Planning Act, by improving the dwellings of the working classes, especially as regards ventilation and dampness, the demolition of slum property, and the prevention of overcrowding, is an Act which will have far reaching results in the prevention of the disease.

The Factory and Workshop Act, by improving the condition of the factories and workshops, by insisting on efficient ventilation and a sufficiency of air space for every individual, and better sanitary conditions generally, is another Act tending to the prevention of Consumption.

The Tuberculosis Regulations, by which all cases are compulsorily notifiable, are important, as all cases are thus known, and steps can be taken to control the source of infection.

The curative measures adopted by the State are the grants to Local Authorities in aid of the necessary expenditure for providing Sanatoria and Dispensaries.

The National Association for the prevention of Consumption has organized caravan tours throughout the country with the object of arousing public opinion and of instructing the people. The Notts. Branch of the National Union of Women Workers undertook the arrangements in this county, and in November Miss Williams came and gave two evening lectures in the British School, and an address to the school children in the afternoon in the Empress Picture Palace, the proprietors of which very kindly lent the hall free of charge. The Notts. Education Committee also allowed the use of the schools. I regret to say that the evening lectures were rather poorly attended, though there were about 650 children present in the afternoon. The lectures were admirably given and were illustrated by lantern slides.

In my opinion the posters advertising the lectures were insignificant and not likely to attract attention, and this may account in some degree for the poor attendance.

Non=Notifiable Infectious Diseases.

VIII.—*Measles*.—This disease was epidemic in the Sherwood Lodge district in April and May, and the School was closed for three weeks; very few children escaped, but the complaint was of a mild character, and none of the cases were fatal. Unfortunately the infection of Measles begins at the onset of the illness, that is, four days before the rash appears and before the complaint can be diagnosed, therefore the first case in a school is usually attending for three or four days in a highly infectious state, as the first symptoms are very much like an ordinary cold, so it can be readily understood why it is that Measles so quickly become epidemic in a school. So far as I know the rest of the district has been entirely free, which is what one would expect considering we had an epidemic in 1912.

IX.—*Whooping Cough*.—There were no cases of this disease so far as I am aware.

X.—*Epidemic Diarrhœa*.—The warm dry summer favoured the onset and spread of this disease, and 8 deaths have been recorded from it, all being in children under twelve months of age. The infection is usually conveyed to the infants' food by contaminated dust or flies, and hence the prevention of the disease consists mainly in—

- (1) Scrupulous care and cleanliness as regards infants' food.
- (2) An efficient system of scavenging.
- (3) The paving of yards around houses.

The Health Visitor has done much in instructing mothers on the first point, and there is not now generally the absolute carelessness and callousness in storing and preparing the food and in keeping the bottles clean that I have found in past years. I shall refer to the scavenging later on in this report. As regards the paving of yards, this is being gradually accomplished under the Housing Act, 1909, and I am sure has an important bearing on the amount of diarrhœa present in a district, as when the soil is loose and porous it becomes polluted with excrementitious and decaying organic matter and gets blown about and infects the food and causes diarrhœa.

XI.—*Influenza* became epidemic towards the latter end of February, and continued till the middle of March. As in previous years it was of a mild description, the only noteworthy feature being the presence of a persistent laryngeal cough.

There were no deaths from this cause.

Cancer.

There were 9 deaths from Cancer. The figures for the previous 10 years are 8, 15, 18, 10, 7, 6, 7, 8, 5, 6. The Imperial Cancer Research Fund is still continuing its work, it has been in existence for some 10 or 11 years, and though it has done good work, I fear the day is far distant when "a cure for Cancer" is an accomplished fact. The extremely careful, elaborate and numerous investigations have been very important, and have been certainly successful in throwing a good deal of light upon the still dark problem of the nature of Cancer.

Probably a good many people thought that, when the scheme was founded, a few years would find the problem solved, but as the work progresses further unknown fields have rendered themselves evident. I might add that the research for a cure of Cancer is not confined to the British Dominions. It is being carried out all over the Continent, and in the United States of America, and there is a constant interchange of views on lines of work and laboratory

methods, comparing notes, and placing material and experience at the disposal of one another. I think, however, that this Country has taken the lead.

Medical Inspection of Schools and School Children.

This Act has now been in operation for six years, and is administered in this District by the County Council, who have appointed medical men, who give their whole time to the work.

The main object of the Act is the supervision of the individual child, the general sanitation of the school remains much as before in the hands of the Local Authority.

It has been found necessary to close some of the Schools, as already reported, and certain children have been excluded for a time with a view to prevent the spread of infectious diseases.

I should like to add that this Act works quite smoothly in this District, and that there has been no friction between the Medical Inspector and the usual medical attendant of the child.

Notification of Infectious Diseases.

I have received 148 notifications during the year. Tabulated and compared with the previous 10 years, they are as follows:—

		1913	1912	1911	1910	1909	1908	1907	1906	1905	1904
Small Pox	...	...	0	0	0	0	0	0	0	0	0
Diphtheria	...	...	47	24	32	12	3	12	12	8	33
Erysipelas	...	...	1	3	0	1	1	2	2	3	0
Scarlet Fever	...	...	90	27	25	38	26	7	11	50	7
Enteric Fever	...	...	1	2	4	0	1	3	16	2	5
Puerperal Fever	...	...	0	0	0	0	0	2	0	0	1
Pulmonary Tuberculosis	5	17	4	Notification not in force.							
Other forms of	„	...	4				„		„		

It is my custom to visit the affected houses, at least all the earliest cases in an epidemic, and endeavour to trace the origin of the infection; enquiries are also made respecting sanitary conditions and milk supply.

Printed instructions are left giving the best means of preventing the disease spreading, and also details about disinfection of the rooms, hands, etc.

All the children in the house are kept from School during the illness.

Disinfection.

Disinfection has, as usual, been carried out after every case of infectious disease. The method adopted in this district for some years, and which has been found to be quite satisfactory, is to fumigate the room with a 40% of Formaldehyde for 24 hours. After fumigation, boiling of the bed linen and clothing, when possible, thorough scrubbing of the room with soap and water, and free exposure to air and sunlight are insisted on. In a large proportion of the cases the householder volunteers to have the room re-papered and the ceiling whitewashed. Fumigation is not sufficient for bulky articles such as mattresses, and a steam disinfector is badly wanted for those articles which cannot be boiled.

Isolation Hospital.

The arrangement with the Basford Rural District Council, by which we can send cases of Diphtheria, Scarlet Fever and Enteric Fever to the Sanatorium, continues to work satisfactorily. 9 cases, 2 of Diphtheria, 6 of Scarlet Fever, and 1 of Enteric Fever, were sent during the year; considering that we had 137 cases of the first two diseases, this is an extremely small number, but only those cases were sent which could not possibly be isolated at home, or for other urgent reasons. The expenses of 5 of these patients were partially defrayed by the friends, the others were too poor to contribute anything.

I do not pretend that these were the only cases we would have liked to remove, there were many more who would have been much better in the Hospital, but as it is a matter of considerable expense, we only sent the absolutely necessary ones.

The isolation for a long period in some of the houses has been a very difficult matter and has entailed considerable inconvenience and often expense, as sometimes it has been necessary for other members of the family to board out on account of their work. Public opinion has changed the last few years, formerly it was difficult to obtain the consent of a parent to the removal of a child to an Isolation Hospital, now, however, it is the usual thing to be asked to send the child away, and it is not always a pleasant task

refusing, as it is difficult to make some of the people understand the position of affairs, and they are ever ready to point out instances where other children have been sent, and to compare this place with some other district where they formerly lived, and in which all children could go to a Hospital. In many cases I fear that the refusal to send is put down to the unkindness of the Medical Officer of Health!

The upkeep of an Isolation Hospital for ourselves alone is of course out of the question. As to the advisability of having a joint hospital, of course it would be a great convenience to all concerned, but I expect the expense would be greater than it is now, as if all districts shared according to their rateable value, or population, and not to the number of cases sent, many more patients would be sent; whether a joint Hospital could be started and districts charged for each patient, and whether this arrangement could be worked more cheaply than what we now pay is a matter for consideration.

If, for any reason, there were no beds available at the Basford Sanatorium, and there are comparatively few set aside for the outside districts, it is rather a serious thing to contemplate that we could not, in a district this size, isolate an infectious case in a Hospital.

Scavenging,

I need hardly make any remarks on this subject as it is, at the time of writing this Report, being carefully considered by the Council.

Up till 1910 I was always able to report favourably on this important work, since then, however, the condition of things has changed, and there have been increasing numbers of complaints as to the irregularity of the contractor's work. It is somewhat surprising as, with the gradual conversion of the midden privy to the water closet, which has been going on for the last year or two, his duties must necessarily have been lightened to a certain extent. However, I trust that under any new arrangement that may be made we shall see a great improvement.

The conversions during the year were:—

Privies with fixed receptables to fresh water closets	48
Privies with movable receptables to fresh water closets	8

Nuisances.

The only complaints I have heard of have been with regard to the scavenging already referred to.

Overcrowding.

No glaring instance has come to my knowledge, though there have occasionally been cases in which the air space was barely sufficient, but these were rectified without any formal notice being served

Cowsheds.

These have been inspected by the Sanitary Inspector and myself during the year. They are generally speaking in a fair condition, drainage, ventilation, light and sufficiency of air space all being attended to much more than in former years.

The three cowsheds mentioned in my last report are still in the same condition.

To insist on certain requirements for the cowsheds is, in my opinion, not enough, we want in addition to be sure that the cattle are healthy as well, and I again ask you to consider the advisability of appointing a Veterinary Inspector to examine all the cows periodically, say twice a year, for the detection of Tuberculosis.

It has been proved beyond doubt that tuberculous cows produce tuberculous milk, and so convey the disease to human beings, and thus it is of the utmost importance that all animals should be free from disease. The veterinary inspection of milk cows would have an excellent effect on the cow keeper, as he would realise that unless his cattle were certified as healthy he would not be allowed to sell the milk, he would be more careful in his purchase of cows and pay more attention to their surroundings in order to keep them healthy.

Slaughter Houses.

Systematic inspections have been made of these by the Sanitary Inspector and myself during the year, and in addition we visited them all with a sub-Committee of the Council.

The only defects found were in two instances the floor was somewhat worn and the floor joints required cementing, otherwise they were in good condition, ventilation, cleanliness and drainage being well attended to.

It was decided that one of the bye-laws should be strictly enforced, viz., that every occupier of a slaughter house shall provide a tin with a closely fitting cover for the collection of refuse.

I do not know whether the occupiers have ever had a copy of the bye-laws, they were made nearly sixty years ago; two of the regulations, Nos. 12 and 13, are not carried out by any owner, but as they are quite unimportant from a sanitary point of view the Sanitary Inspector and myself have never insisted on them: they are that the word "Slaughter House" shall be painted over the door, and that a copy of the bye-laws in large characters shall be affixed in a conspicuous place in the slaughter house.

One slaughter house has been abolished during the year, and a new one opened.

Mortuary.

I referred to the want of a mortuary in my last report; I do not know whether the subject has been considered by the Council. It is true that one is not often needed, but making a post mortem examination in a private house is very inconvenient besides being distasteful to the relatives.

Housing, Town Planning Act, 1909.

Systematic inspections of houses have been made by the Sanitary Inspector and myself during the year, and full details of the conditions found are taken at the time of inspection, which are afterwards transferred to the Official records, together with our recommendations. These suggestions are considered by the Housing Committee, who take it in turn to visit the properties concerned and pass their opinion as to whether they are reasonable; in the great majority of cases I believe their opinion coincides with ours.

Most of the houses inspected were defective in some particular or other, but generally speaking they were in a better condition than those inspected in previous years, this of course is accounted for by the fact that we inspected the worst of the property when the Act first came into force.

The chief defects found were dampness, due either to the want of a damp course or to a dilapidated roof or spouting, windows not made to open, absence of sinks, unpaved yards and the presence of

the midden privy. With a few exceptions the repairs have been executed by the landlord without a great deal of grumbling, though they have taken a considerable time.

The housing accommodation throughout the district is sufficient, and good as regards the recently built houses, though as I said in my last report there always will be tenants who, when everything has been done by the Sanitary Authority to give them comfortable and healthy homes, will relapse to their former condition of dirt and untidiness.

About 25 new houses for the working classes were erected during the year.

The Medical Officer of Health is asked by the Local Government Board to give in tabular form the following information :—

Houses inspected.	Certified as unfit for human habitation.	Number of closing orders recommended by the M.O.H.
133	19	19
Number of closing orders made by the Council.	Number of houses remedied without a closing order.	Number of houses made fit for habitation after closing order.
13	79	8

No demolition orders were made.

Factories, Workshops and Bakehouses.

There are 13 factories, 19 bakehouses, and 40 other workshops on the register.

They have all been inspected during the year, and with the exception of the hosiery workshops were all in a fairly satisfactory condition. Many of these are not limewashed frequently enough, and a good many of them were in a dirty condition generally—floors unwashed or unswept and the place full of dust. There was no suspicion of overcrowding in any of them, as a matter of fact in many the frames are tenantless owing to the want of work. In these workshops light is always sufficient, but ventilation generally bad, windows being kept shut and the chimneys blocked up.

The bakehouses were in a good condition, the chief fault being that the limewashing was not done sufficiently often. According to the Regulations it should be done every six months, but I think that unless there were regular inspection some of them would not be done at all.

There is one underground bakehouse which complies with all the requirements.

Lists of Outworkers have been received from the employers, but I understand that there is only one factory in this District which complies strictly with the statutory duty of sending two lists each year. In the Statement at the end of my Report the number of Outworkers is given, but as the name of the same workman sometimes appears twice in those lists, it does not show accurately the exact number of Outworkers. The object of having these lists is that outwork can be suspended if the premises are unwholesome, or if infectious disease exists; the houses are not always clean, but the Sanitary Inspector, the Health Visitor and myself do our best to persuade people to keep them in better condition; there were no cases so bad that we had to bring them officially to your notice. There were 10 instances of infectious disease occurring in outworkers' premises, and I had no difficulty in getting the work stopped.

Dr. Handford has kindly supplied me with his meteorological records for the year which I append to this Report, together with the usual Local Government Board's Tables and the Report of the Inspector of Nuisances.

In conclusion I desire to express to the Chairman and Members of the Council my sincere thanks for the unvarying courtesy and consideration which I have at all times received at their hands.

I am, Gentlemen,

Your obedient servant,

HARVEY FRANCIS, M.D.,

Medical Officer of Health.

ARNOLD DISTRICT.

TABLE I.

Vital Statistics of Whole District during 1913 and previous Years.

YEAR.	Popula- tion estimated to Middle of each Year.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS.		NETT DEATHS BELONGING TO THE DISTRICT.			
		Un- corrected Number.	Nett		Number.	Rate.	Of Non- resi- dents regis- tered in the District	Of Resi- dents not regis- tered in the District	Under 1 Year of Age.		At all Ages.	
			Number.	Rate.					Number.	Rate per 1,000 Nett Births.		
1908	10,624	332	...	31.25	163	15.34	...	10	57	171	173	16.28
1909	10,755	320	...	29.75	157	14.59	...	12	51	159	169	15.71
1910	10,953	275	...	25.1	125	11.41	...	9	38	138	134	12.23
1911	11,207	286	288	25.69	118	10.52	1	14	40	138	131	11.68
1912	11,646	286	289	24.81	120	10.3	2	14	26	89	132	11.33
1913	11,839	278	278	23.48	139	11.74	0	15	31	111	154	13.0

Area of District in acres (land and inland water)	4,612.	Total population at all ages			...	...	11,147
		Number of inhabited houses			...	...	2,463
		Average number of persons per house			...	...	4.5

} At Census
of 1911.

TABLE II.

Cases of Infectious Disease notified during the Year 1913.

NOTIFIABLE DISEASE	No. of Cases Notified								TOTAL CASES REMOVED TO HOSPITAL
	At all Ages	At Ages—Years							
		Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 and upwards	
Small-pox ...	...	...	...	...	...	...	...	...	...
Cholera (C) ...	...	...	...	...	...	...	...	...	...
Plague (P) ...	...	...	...	...	...	...	...	...	...
Diphtheria (including Membranous Croup) ...	47	1	7	31	6	2	...	...	2
Erysipelas ...	1	...	...	...	...	...	1	...	...
Scarlet Fever ...	90	...	23	59	7	1	...	...	6
Typhus Fever ...	...	...	...	...	...	...	...	...	...
Enteric Fever ...	...	...	...	...	...	...	...	...	...
Relapsing Fever (R) ...	1	...	...	...	1	...	...	...	1
Continued Fever (C) ...	...	...	...	...	...	...	...	...	...
Puerperal Fever ...	...	...	...	...	...	...	...	...	...
Cerebro-spinal Meningitis ...	...	...	...	...	...	...	...	...	...
Polio-myelitis ...	...	...	...	...	...	...	...	...	...
Pulmonary Tuberculosis ...	5	...	...	...	1	2	2	...	1
Other forms of Tuberculosis ...	4	...	...	3	1	...	...	...	...
Totals ...	148	1	30	93	16	5	3	...	10

Isolation Hospital	}	Hucknall Torkard (Small-Pox only).
or Hospitals		Basford Sanatorium (Scarlet Fever, Diphtheria, Enteric Fever).
Sanatoria, etc.		Notts. Sanatorium (Pulmonary Tuberculosis).

ARNOLD DISTRICT.

TABLE III.

Causes of, and ages at Death during Year 1913.

CAUSE OF DEATH	NETT DEATHS AT THE SUBJOINED AGES OF "RESIDENTS," WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT.									TOTAL DEATHS WHETHER OF 'RESIDENTS' OR 'NON-RESIDENTS' IN INSTITUTIONS IN THE DISTRICT
	All Ages	Under 1	1 and under 2	2 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and upwards	
All Causes—										
Certified	153	31	5	6	12	7	15	27	50	..
Uncertified	1	..	..	..	..	..	..	..	1	..
Enteric Fever .. ..	..	..	..	..	..	..	..	..	..	..
Small-Pox .. ..	..	..	..	..	..	..	..	..	..	..
Measles .. ..	..	..	..	..	..	..	..	..	..	..
Scarlet Fever	6	..	..	4	2	..	..	..	..	..
Whooping Cough .. ..	..	..	..	..	..	..	..	..	..	..
Diphtheria	11	1	1	1	6	1	1	..	..	..
Influenza .. ..	..	..	..	..	..	..	..	..	..	..
Erysipelas	1	..	..	..	..	..	..	..	1	..
Phthisis (Pulmonary Tuberculosis)	8	..	..	..	2	2	3	1	..	..
Tuberculous Meningitis	1	..	..	..	..	1	..	..	..	..
Other Tuberculous Diseases	3	1	..	1	1	..	..	..	..	..
Cancer, Malignant Disease	9	..	..	..	..	..	1	6	2	..
Rheumatic Fever .. ..	..	..	..	..	..	..	..	..	..	..
Meningitis	1	..	1	..	..	..	..	..	..	..
Organic Heart Disease	16	..	..	..	..	..	..	8	8	..
Bronchitis	10	1	1	..	..	..	..	1	7	..
Pneumonia (all forms)	6	2	2	..	..	..	..	..	2	..
Other Diseases of Respiratory Organs	4	..	..	..	..	..	..	1	3	..
Diarrhoea & Enteritis	8	8	..	..	..	..	..	..	..	..
Appendicitis and Typhlitis .. ..	..	..	..	..	..	..	..	..	..	..
Cirrhosis of Liver	1	..	..	..	..	..	..	..	1	..
Alcoholism	1	..	..	..	..	..	..	1	..	..
Nephritis & Bright's Disease	4	..	..	..	..	1	2	1	..	..
Puerperal Fever .. ..	..	..	..	..	..	..	..	..	..	..
Other Accidents and Diseases of Pregnancy & Parturition	3	..	..	..	..	..	3	..	..	..
Congenital Debility and Malformation, including Premature Birth	16	16	..	..	..	..	..	..	..	..
Violent Deaths, excluding Suicide	2	..	..	..	..	..	..	..	2	..
Suicide	1	..	..	..	..	..	1	..	..	..
Other Defined Diseases	42	2	..	..	1	2	4	8	25	..
Diseases ill-defined or unknown .. ..	..	..	..	..	..	..	..	..	..	..
	154	31	5	6	12	7	15	27	51	..

ARNOLD DISTRICT.

TABLE IV.

Infantile Mortality during the Year 1913.

Nett Deaths from stated Causes at various Ages under One Year of Age.

CAUSE OF DEATH.	Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 1 Month	1-3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths under One Year
All Causes	10	1	..	3	14	7	5	4	1	31
Certified
Uncertified..
Small-Pox
Chicken-Pox
Measles
Scarlet Fever..
Whooping Cough
Diphtheria	1	..	1
Erysipelas
Tuberculous Meningitis
Abdominal
Tuberculosis	1	1
Other Tuberculous Diseases
Meningitis (<i>not Tuberculous</i>)
Convulsions
Laryngitis
Bronchitis	1	..	..	1
Pneumonia (all forms)	1	..	1	..	2
Diarrhœa	2	1	2	..	5
Enteritis	1	2	..	..	3
Gastritis
Syphilis
Rickets
Suffocation, overlying
Injury at Birth
Atelectasis
Congenital Malformations	1	..	..	..	1	..	..	..	..	1
Premature Birth ..	6	..	..	2	8	1	..	..	..	9
Atrophy, Debility, and Marasmus	3	1	..	..	4	1	1	..	..	6
Other Causes..	1	1	1	..	..	..	2
Totals	10	1	..	3	14	7	5	4	1	31

 Nett Births in the year { Legitimate, 269.
 { Illegitimate, 9.

 Nett Deaths in the year { Legitimate infants, 27.
 { Illegitimate infants, 4.

ARNOLD DISTRICT.

Annual Report of the Medical Officer of Health for the year 1913 on the administration of the Factory and Workshop Act, 1901, in connection with Factories, Workshops, Workplaces and Homework.

1.—INSPECTION.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises (1)	Number of		
	Inspections (2)	Written Notices (3)	Prosecutions (4)
Factories (including Factory Laundries)	26	..	..
Workshops (including Workshop Laundries)	97	..	..
Workplaces (other than the Outworkers' premises included in Part 3 of this Report) .. .. .	..	..	..
Total	123	..	..

2.—DEFECTS FOUND.

Particulars. (1)	No. of Defects.			Number of Prosecutions (5)
	Found (2)	Remedied (3)	Referred to H.M. Inspector (4)	
<i>Nuisances under the Public Health Acts :—</i>				
Want of cleanliness	5	5	..	..
Want of ventilation	6	6	..	..
Other nuisances .. .. .	..	..	..	..
Sanitary accommodation { insufficient unsuitable or defective not separate for sexes .. ..	..	..	..	..
	1	1	..	..

Total	12	12	..	..

3.—HOME WORK.

NATURE OF WORK	OUTWORKERS' LISTS, SECTION 107										OUTWORK IN UNWHOLESOME PREMISES, SECTION 108			OUTWORK IN INFECTED PREMISES, SECTIONS 109, 110			
	Lists received from Employers						Prosecutions				Instances			Orders made (S. 110)			Prosecutions (Sections 109, 110)
	Sending twice in the year		Sending once in the year		Notices served on Occupiers as to keeping or sending lists.		Failing to keep or permit inspection of lists		Failing to send lists		Instances served			Prosecutions			
	Outworkers		Outworkers		Lists		Con-tractors		Work-men								
	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)		
(1)																	
Wearing apparel—																	
(1) making, &c.	10	108	91	10	..	242	2	..	..	..	..	..	..	10	10	..
(2) cleaning and washing	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Lace, lace curtains and nets	8	10	7	7	..	7	..	..	..	..	..	..	..	..	..	..
Total ..	18	118	98	17	..	249	8	..	..	..	..	..	..	10	10	..

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year. (1)	Num- ber. (2)
Bakehouses	19
Hosiery, Joiners, Shoe Repairers, &c.	40
Total number of workshops on Register	59

5.—OTHER MATTERS.

Class. (1)	Num- ber. (2)
Matters notified to H.M. Inspector of Factories :—	
Failure to affix Abstract of the Factory and Workshop Act (s. 133) .. .. .	.. .. .
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5) {	Notified by H.M. Inspector
	Reports (of action taken) sent to H.M. Inspector
Other .. .. .	.. .. .
Underground Bakehouses (s. 101) :—	
Certificates granted during the year .. .. .	.. .. .
In use at the end of the year	1

March 16th, 1914.

Harvey Francis,
Medical Officer of Health.

METEOROLOGICAL RECORDS, at Elmfield, Southwell, by Dr. Handford, for the year 1913.

Longitude 0° 56' 54" W.

Latitude 53° 4' 42" N.

MONTH.	TEMPERATURE.						FROSTS.		RELATIVE HUMIDITY at 8 a.m.	RAINFALL.			
	Maxi- mum.	Date.	Mini- mum.	Date.	Mean.	Differ- ence from Average.	In Screen.	On Grass.		Total Depth. Inches.	Greatest Fall in 24 Hours.		Number of Rainy Days.
											Inches.	Date.	
January ..	52.0	23rd	11.1	13th	37.2	+ 0.7	17	21	93.1	2.780	0.705	24th	20
February ..	51.4	9th	22.8	23rd	38.7	- 0.3	17	24	89.1	0.780	0.320	9th	15
March ..	54.9	3rd	25.8	18th	41.8	+ 1.6	6	21	83.3	3.625	0.410	22nd	23
April ..	65.0	24th	26.1	13th	45.8	+ 1.2	5	12	81.2	2.540	0.580	15th	20
May ..	78.3	25th	32.3	17th	52.9	+ 2.1	0	6	75.9	1.990	0.700	3rd	10
June ..	79.5	16th	39.2	1st	57.6	+ 0.8	0	0	74.6	0.505	0.170	17th	8
July ..	75.5	29th	40.1	9th	57.8	- 2.2	0	0	79.8	0.490	0.200	9th	8
August ..	81.2	3rd	41.1	5th	58.8	- 0.6	0	0	78.5	1.685	0.830	29th	9
September ..	78.8	27th	36.3	16th	57.0	+ 2.2	0	0	85.2	1.495	0.460	17th	17
October ..	65.8	1st	27.8	24th	49.7	+ 2.9	4	7	93.5	4.990	2.480	5th	15
November ..	57.5	17th	23.3	28th	44.8	+ 2.2	7	13	90.8	1.855	0.260	11th	18
December ..	53.4	8th	22.5	31st	39.9	+ 2.1	9	20	85.9	0.710	0.170	4th	11
							65	124		13.446	2.480	Oct. 5th	174

Maximum Temperature, 81.2, on August 3rd. Minimum Temperature, 11.1, on January 13th.

Total Rainfall, 23.445 inches. Difference from Average, - 2.555.

Total Rainfall, taken by Monthly Rain Gauge, 22.910 inches. Diameter of Funnel, 5 in. Height of Top { Above Ground, 1 ft. 0 in.
Above Sea Level, 132.27 ft.

Arnold Urban District Council.

SANITARY INSPECTOR'S REPORT

For the Year ending December 31st, 1913.

To the Chairman and Members of the Arnold Urban District Council.

GENTLEMEN,

I have the honour of submitting to you my Report of the work done during the year 1913.

As will be seen the activity of the Council has been more than maintained in improving the Sanitary condition of the district, by the careful administration of the various Public Health Acts, thereby removing conditions that were, or likely to become, a danger to the health of the inhabitants of the District.

Sewerage.

In the laying of new pipe sewers, there has been a lull, all the existing laid out roads having been sewered and drained. Plans for six new streets have been approved, but owing to the slackness in the speculative building trade none of the roads have been commenced upon.

The working of the whole of the sewers has been exceedingly good, only two 6-in. sewers, in Cross Street and Wood Street, having given trouble.

During the year 59 houses have been connected up to the sewers, and there are now only two houses draining into cesspools that can be connected up to the sewerage system.

In addition to the above, two houses within the City boundaries were connected to Woodthorpe Drive sewer.

The nine houses in Woodthorpe Drive, near the Suburban Railway, are not yet connected to the sewer. Arrangements should be made for the extension of the sewer at the back of the houses in Villiers Road.

Scavenging.

The removal of the house refuse has not given that satisfaction as in previous years. This is probably due to the Contractor not being satisfied with the remuneration, and his inability to obtain a better class of workmen to carry out the work at the wages he pays them. The Council have therefore given the Contractor notice to terminate his contract at the end of March next, and it is anticipated that under the new contract, which will contain additional safeguards and penalties, the work will be carried out in a more satisfactory manner.

Forty-eight midden privies and eight tubs have been converted into water closets, which is rather more than during the previous year.

The number of W.C.'s and slop closets in the Parish, exclusive of those in factories, schools, etc., is 1,085.

Cowsheds and Dairies.

The whole of the cowsheds have been visited at least twice during the year, they are generally in a satisfactory condition.

There are 33 cow-keepers and six purveyors of milk.

There are no dairies or milk-shops.

Slaughter Houses.

The seven slaughter houses have been frequently inspected. One slaughter house has been abolished and a new one for pigs only has been erected. The Sanitary Committee, with their Officers, visited them on one occasion, and suggested slight improvements, in two instances to yard paving. They are generally kept in good order and frequently whitewashed. A large proportion of the meat consumed in the district is slaughtered in Nottingham. No case of selling diseased meat and stale fish was reported during the year.

Bakehouses.

The 19 Bakehouses, 17 of which are occupied, are generally found to be clean. On two occasions notices were served to cleanse and limewash.

Outworkers.

Thirty-five lists of Outworkers have been received containing 465 names; 40 addresses were of Outworkers residing in adjoining districts and to which the usual notice was forwarded. 50 addresses came from other Local Authorities, and 18 lists were received from firms twice during the year. The Insurance Act has diminished the number of outworkers upon the books, as the middlemen will only give out work to those who can do a certain amount.

Housing and Town Planning Act.

In conjunction with the Medical Officer of Health, 133 houses have been inspected and reported upon to the Housing Committee during the year, making a total of 438 since the Committee was formed. Closing orders in respect of 19 of these were made, but the tenants as yet have not been ordered to quit the occupied houses.

Seventy-nine houses have been put in order and the notices complied with, and the remainder are still in the same condition.

In 54 instances where the owners have failed to execute the repair notices, the Committee have given instructions for Closing Notices to be served.

The chief difficulty in the way of the owners complying with the notices, is the low rental received for the majority of the houses. In some instances the houses are only let at 1/10 per week, and in no case does the rent exceed 4/- per week, out of which the rates have to be paid. To carry out the requirements of the notices means that the rent for several years is required to pay for the cost of the improvements, and in some instances the owners have no capital and obtain an additional mortgage upon the property.

General.

Owing to the large number of cases of infectious disease prevalent in this and the surrounding districts, chiefly Scarlet Fever among the young children, it has been necessary to disinfect a greater number of houses. This is done, as in former years, with Formaldehyde gas, or by spraying the walls with a solution of the same disinfectant.

A much greater quantity of disinfecting fluid has been supplied free to those houses where illness has occurred. Householders have a tendency to use it much more freely than if they purchased it themselves.

Only four complaints were received respecting the keeping of pigs. In two cases the pigs were sold, and in the other two cases the styes were rebuilt and drained. Owing to the dearth of food very few pigs are now kept, with the result that many of the styes are in a dilapidated condition.

The chief nuisances are from the blockage of waste water closets, due to bad usage, chiefly owing to children throwing down stones, tins, etc., and which being out of sight are not noticed until too late to prevent a blockage. It is only among the commoner class of houses where this trouble arises, otherwise very few drains become blocked. All new drains are laid true to levels and tested by water pressure.

Twenty-eight Legal notices were served dealing with defective privies, choked drains, etc.

No persons have been proceeded against during the year.

Some attempt has been made to abolish the midden privies and ashpits, and 56 w.c.'s have been installed in their place. In several instances yards common to several houses have been tar paved, and in others paths 6 feet wide have been formed at the backs of the houses.

Thirty-five houses and one Picture House have been erected during the year, the smallest number for the last 12 years.

There are 14 shops for the preparation and sale of Chipped Potatoes and Fried Fish. They are mostly clean and well fitted for the purpose, and conducted as far as is reasonably possible in a proper manner. The chief objection to them are the effluvia caused by the splashing of the fat and oil on the hot range, use of oil instead of lard for frying, and in some cases from sulphurous fumes from the open coke fires.

The most needed improvement, excluding the abolition of the midden privies, is the covering in of the open dyke running at the front of Cottage Row. The land on each side of the dyke, being open and unenclosed, is used as a tipping ground for builders' rammel, which in a short time finds its way into the dyke. Children are continually damming it up, and falling in, and the inhabitants of the

neighbourhood would welcome an improvement. The owners of the land have been approached in the matter, and I am hoping to be able to report favourably at a later date.

To assist your Officers in the carrying out of their duties it is advisable for the Council to apply to the Local Government Board for sanction to adopt Secs. 23, 24, 25, 26 and 27 of the Public Health Amendment Act, 1890, and for various sections in Part III. of the 1907 Amendment Act. The Bye-Laws dealing with the conveyance of night-soil and other noxious matters through the town, and the provisions of the Town Police Clauses Act, 1847 (Secs. 30 and 31), in respect of permitting chimneys to be on fire should be more strictly observed.

I have the honour to remain,

Your obedient servant,

R. E. CLARKE,

Inspector of Nuisances.